#### FAMILY ASSESSMENT/EVALUATION OF PROGRESS

#### REFERENCE GUIDE FOR MEASURING CHANGE ACROSS THE ELEMENTS

Note: Some descriptors specifically include reference to the family's culture/traditions or reference to the behavior's/condition's impact on the child's health, safety and welfare. In considering the applicability of any of the descriptors, a family's culture should always be taken into account. In addition, a particular behavior/condition is not relevant unless it impacts a child's health, safety or welfare. Therefore, the impact of a behavior/condition on a child's health, safety or welfare should always be assessed when making judgments about what needs to change.

#### I. DOMAIN: CHILD(REN)'S SITUATION AND GENERAL FUNCTIONING

1. Child's Level of Need and Demands on Parents Related to Age, Temperament, and Development Criteria: The level of demand that the child care responsibilities place on the parents/caregivers, based on the children's functioning and needs, the number of children and how the parents/caregivers experience the level of demand.

Low Demands on Family	Moderate Demands on Family	Significant Demands on Family	T	hreats to Safety
Child's behavior/temperament is "easy"; e.g., is generally adaptable and copes with changes in routine and stress without much distress, is easy to satisfy, is easy to placate when distressed.	Child is a premature infant.  Child has an illness that requires some unusual parental care.	Child requires high levels of extraordinary or unusual care, because of a chronic illness or profound physical, mental, social or developmental delays.	•	Child is 0-6 years old and/or unable to protect self.
Child is developmentally age appropriate, and developmental stage is not experienced by parent(s) as demanding.	Child is behaviorally challenged, displays some behavioral disturbance.  Child has some developmental delays which impact child's level of independent functioning.	Child requires extensive/constant parental care/attention.  Child displays severe behavioral disturbances or severe acting out behavior.	•	Child has exceptional needs which parents cannot/will not meet.
Child generally complies with parental requests and guidance.	Child is often difficult to satisfy, is demanding of attention.  Child is a colicky infant, cries constantly and is frequently distressed.  Child is defiant of authority and resists parental attempts to limit behaviors.	Child has frequent temper tantrums, refuses to comply with parental requests, openly challenges parental authority.  Behaviors/conditions generally seen as moderately demanding are experienced by parent(s) as significantly demanding.		meet.

The number of children and developmental stage of children is not experienced by parent(s) or observed by worker as demanding.  The number of children and developmental stage of children may be demanding, but parent(s) have skills, capacities and supports to cope.	Child is at a developmental stage that is difficult. frustrating and demanding for parent(s)  The number of children and/or developmental stage are perceived by the parents and/or observed by the worker as a moderate demand on the parents.	The number of children and/or developmental stage are perceived by the parents and/or observed by the worker as a significant demand on the parents.	
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2. Child's Self-Protective Capacities and Access to Support Systems

Criteria: The degree to which the child can protect him or herself, can communicate with others and can access support systems.

Low Vulnerability/ High Capacity	Moderate Vulnerability/ Moderate Capacity	High Vulnerability/ Low Capacity	Threats to Safety
Ingli Capacity	Wioderate Capacity	Low Capacity	
Child has access to and utilizes multiple support systems (adults/siblings/friends).	Child lacks ability to fully explain needs or circumstances, has limited vocabulary	Is isolated and has no access to supportive adults/siblings/friends.	Child is fearful of the home situation:
Child is able and willing to communicate safety concerns to adults.	Child physically or verbally intervenes in family conflicts.	Child is unable and/or unwilling to communicate concerns.	
Child takes action to avoid dangerous situations.	Child displays anxiety and discomfort about caretaker/home environment.	Child accepts abuse/blame without resistance, unable (physically or emotionally) to leave volatile situation.	Child is 0- 6 years old and/or unable to protect self
Child can and will physically leave or protect self.	Child not openly fearful of home or caretaker, but does not identify them as protective or nurturing.	Extreme fear about caretakers and home environment.	
Child accurately views caretakers as being nurturing, supportive, and protective and can depend on them for help and protection.		Child is fearful of communicating concerns.	

### 3. Impact of Maltreatment on the Health and Development of the Child

Criteria: The degree to which the maltreatment has impacted the health and development of the child and the current functioning of the child. The level of maltreatment the child has been subjected to and the implications this has for the child's treatment needs.

Low/No Impact/Age Appropriate Functioning	Moderate Impact/Problems in Functioning	Significant Impact/Problems in Functioning	Threats to Safety
Child's social, emotional, cognitive and physical development is near or at age level (indicates secure	Child has some developmental delays due to maltreatment.	Child has significant developmental delays related to maltreatment.	Child shows effects of maltreatment such as serious emotional
attachment). Any developmental delays present are not related to maltreatment; <b>or</b>	Child exhibits some symptoms of attachment disorder, but effects are moderated and behaviors are not severe.	Child has significant difficulty in forming and maintaining attachments, demonstrates behaviors consistent with an attachment disorder: inability/refusal to make eye contact, violence toward	symptoms and lack of behavioral control.
Child has recovered social, emotional, cognitive and/or physical delays, consistent with his or her potential.	Child exhibits some symptoms of emotional trauma, but effects are moderated and child can control emotions and behavior in some situations.	others, superficially charming towards strangers, lack of conscience, lack of cause and effect thinking, poor peer relationships, destructiveness, need to be in control	Child shows effects of
Child can control emotions and behaviors in most situations, consistent with developmental stage.	The following descriptors are relevant only at the original Family Assessment:	Child exhibits symptoms of severe emotional trauma, such as depression, anxiety, withdrawal, aggression and self injury as a result of maltreatment	maltreatment such as serious physical symptoms.
Child has good coping skills and demonstrates resilience.	Child sustained superficial injury which did not require medical attention (e.g., bruises).  Child has been subjected to intermittent	The following descriptors are relevant only at the original Family Assessment:	
The following descriptors are relevant only at the original Family Assessment:	neglect, with periods of competent caregiving, or chronic mild neglect with no physical harm to child.	Child has been subjected to invasive sexual abuse.  Child has been subjected to chronic physical abuse.	
No current or previous injury/harm to child from maltreatment.	Child has been subjected to fondling, exhibitionism	Child has been subjected to chronic severe neglect or neglect resulting in the need for medical attention.	
Isolated incident of abuse/neglect and child not seriously hurt	Incident of abuse/neglect was confined to a specific situation and as a result of a specific situation. Abusive/neglectful behavior not apparent elsewhere.	Child has/had a major injury(ies) as a result of maltreatment which requires (required) medical treatment (ie: broken bones, internal injuries).	

### II. DOMAIN: PARENTING PRACTICES

# 1. Discipline

Criteria: The degree to which the parent/caregiver develops strategies to set and enforce limits, manage child's behavior, protect child, educate and guide child's behavior and encourage development of self-control.

Functioning Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Uses non-violent and non-physical discipline strategies	Exclusive use of punishment to control all behavior – uses no guidance, positive reinforcement, redirection, or other	Relies exclusively on physical discipline methods such as spanking or whipping	One or both parents are violent.
Maintains good emotional self control while disciplining	Is inconsistent in ability to maintain adequate emotional control while disciplining.	Uses severe, physical, violent forms of discipline  Routinely loses emotional control resulting in excessive physical discipline, harsh verbal berating, displays of violent anger and emotional outbursts	<ul> <li>One or both parents cannot control behavior</li> <li>One or both parents fear they will maltreat child and/or request placement.</li> </ul>
Uses positive reinforcement for desired behaviors  Uses a variety of age- and developmentally- appropriate discipline strategies  Chooses discipline strategies that are most appropriate for the situation and type of misbehavior	May know a variety of discipline strategies, but is not effective in using them.	Uses discipline strategies that are not appropriate for the child's age, developmental level, or the situation  Singles out particular child for excessive punishment	piacement.
Establishes reasonable rules and limits in areas affecting the child's health, safety and welfare, makes them clear to child; is reasonably consistent in enforcing them	Rules and expectations in family are unclear.  Follow through on enforcing limits/rules is sporadic.	Fails to set limits and expectations for child's behavior, jeopardizing the child's health, safety and welfare.	One or both parents lack skill, knowledge or motivation in parenting which affects child safety

Intervenes before behavior escalates out of control.	Attempts to intervene to manage behavior, but strategies are ineffective.  Inconsistent in intervening to control child's misbehavior or protect child from getting hurt.  Parent's discipline methods tend to escalate rather than control misbehavior.	Ignores child's behavior, even though it could result in serious injury.	One or both parents lack skill, knowledge or motivation in parenting which affects child safety	
Expectations for child's behavior are reasonable, considering child's age, developmental level, and situation.	Expectations of child are somewhat inappropriate for child's age or developmental level.	Expectations for child's behavior are excessively rigid, and unrealistic for age and developmental level.		

# 2. Basic Needs/Supervision

Criteria: The degree to which the parent/caregiver meets the child's needs for food/nutrition, hygiene, health, shelter, and education; the degree to which the parent/caregiver supervises the child's activities to prevent harm.

Functioning Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Provides sufficient nutritional food to assure good health	Inconsistent in feeding child  Routinely feeds food that is not nutritionally sound	Cannot or will not provide child with food; regularly withholds food	One or both parents lack knowledge, skill, motivation in parenting which affects child safety
Provides child with basic preventive health care	Fails to provide basic preventive health care; inconsistently seeks treatment for medical conditions; delays seeking treatment	Ignores or is unable to recognize symptoms of medical conditions or illness	No adult in the home will perform parental
Recognizes symptoms of illness and seeks medical attention where warranted; follows recommendations of	Fails to provide dental care, eye care, and other non-emergency health care needs	Ignores or is unable to follow treatment recommendations for medical conditions; fails to provide dental care, resulting in	duties and responsibilities
medical providers	Lack of hygiene, cleanliness, bathing, diaper changing, places child at risk of serious diaper rash, abrasions, infections	Fails or is unable to give prescribed medication; places the child's health or functioning at serious risk	
	rush, aorasions, infections	Child is diagnosed as failure to thrive for non-organic reasons	
		Fails to provide basic hygiene, child has strong odor, suffers from skin condition, loss of hair or other health conditions related to poor hygiene	One or both parents cannot control behavior.
		Believes child has or creates symptoms of a medical condition which cannot be confirmed by physician; parent provides unwarranted medical treatment himself/herself (Munchausen's by Proxy)	

Provides clothing that is appropriate for the weather to protect child from illness/other health risk.	Is inconsistent about providing clothing appropriate to protect child from weather.	Ignores or does not recognize the need to provide clothing appropriate to protect child from weather.	One or both parents lack knowledge, skill, motivation in parenting which affects child safety
Parent provides and maintains a home that is sanitary, has no identifiable safety hazards and has basic working utilities, i.e. heat, electricity, plumbing or safe alternatives.  Parent puts in place and maintains provisions to safeguard children from hazards near home.	The home is inadequately heated, or has minor structural, mechanical and/or vermin problems.  Utilities are periodically cut off.  Family is living in substandard housing or a shelter but is seeking to remedy the situation.  Home/yard needs temporary modifications to keep children safe (barriers on stairwells for toddlers, etc.)	Home is structurally unstable, lacks utilities, has gas leaks, lacks working plumbing, and/or has exposed wiring and other hazards in the home or yard.  The home environment is unsanitary and/or hazardous: garbage and spoiled food strewn around, solvents, broken glass, or drug paraphernalia within reach of young children.  Home is in a high traffic area or there are other hazards close to the home and no provisions to safeguard children.	Living arrangements seriously endanger the physical health of the child.
Monitors child's activities; intervenes to redirect child or stop a potentially dangerous behavior.	May recognize when child is in danger, but is inconsistent in intervening or redirecting.	Does not recognize danger to child in situations; unable to accurately assess child's self-care capacities.  May recognize when child is in danger, but unwilling or unable to intervene or redirect.	<ul> <li>No adult in the home will perform parental duties and responsibilities</li> <li>One or both parents cannot control behavior</li> <li>One or both parents lack knowledge, skill, motivation in parenting which affects child safety</li> </ul>
Leaves child in the care of responsible, mature and competent substitute caregivers.	Leaves child not yet developmentally able to care for self and meet own needs, alone without adult supervision for short periods of time.  Unable to accurately assess child's self-care capacities.	Leaves child informally with changing caregivers for long periods of time, inconsistent with his/her cultural caregiving traditions.  Leaves young child alone, or leaves child with inappropriate caregiver.  Abandons child.	Parent(s)' whereabouts unknown.

# 3. Perception and Expectation of Child's Behavior

Criteria: The degree to which the parent/caregiver sets age and developmentally appropriate standards and expectations for child's behavior and responds to child consistent with those standards.

Functioning/Perception Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning/Perception	Significant Problems in Functioning/Perception	Threats to Safety
Expectations for child's behavior are consistent with child's age and development level.	Expectations of child are inconsistent – age and developmentally appropriate in some areas, not in others.  Misjudges child's capacity for self care and self control.	Has rigid and very unrealistic expectations for child's behavior considering the child's age and developmental level.	One or both parents lack knowledge, skill, motivation in parenting which affects child safety.
Individualizes and modifies parenting interventions to address child's unique personality, needs and situation.	Sporadic in adjusting parenting interventions to meet individual child's needs and situation.	Unable to adjust parenting interventions to meet individual child's needs and situation.	
Describes child in positive terms  – takes pride in child's accomplishments.  Maintains positive attachment and	Views child in a way that interferes with his/her ability to provide nurturance and support or to exercise patience and understanding with child's behaviors.	Consistently views child in negative terms – is consistently critical of child's behavior and development.  Blames and scapegoats child for child's, parent's	Child is seen by either parent as responsible for the parent(s)' problems.
relationship with child in spite of child's misbehavior.	Conditions	or family's problems.  Interprets child's misbehavior as indication of inherent "badness" of child – views misbehavior as evidence of mal-intent or deliberate attack on parent.	Child is perceived in extremely negative terms by one or both parents.
Consistently remains in parenting role with child in areas related to child's health, safety and welfaredoes not expect child to act as "little adult".	Is inconsistent in remaining in the parenting role with child in areas related to child's health, safety and welfare.	Exhibits role reversal; expects child to behave in adult-like manner – views child as peer; expects child to meet parent's needs.	No adult in the home will perform parental duties and responsibilities.

# 4. Nurturing and Child Development

Criteria: The degree to which the parent/caregiver is attached to child and meets child's need for attachment, encourages child's development and meets child's developmental needs.

Functioning Supports Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Regularly recognizes and responds to child's needs and advances	Intermittently or sporadically responds to and recognizes child's needs and advances	Consistently ignores child, fails to respond or recognize child's needs and advances	One or both parents lack knowledge, skill, motivation in parenting which affects child safety.
Recognizes and responds to child's cues in a timely manner	Intermittently or sporadically recognizes and responds to child's cues.	Fails to recognize or respond to child's cues	
	Is slow to respond to child's basic needs.		
Demonstrates affection for the child in a manner appropriate within the family's culture	Is sporadic/inattentive in responding to child's need for affection	Rejects or is unable to respond to child's need for affection	
Engages child in age appropriate activities and other positive interactions, and participates in play	Intermittently or sporadically engages child in age appropriate activities, or engages child in non-age appropriate activities or negative interactions	Refuses or is unable to engage the child in age appropriate activities or other positive interactions	
Encourages/promotes child's social interactions	Limits child's needed social interactions	Intentionally isolates the child (hides child, locks in room, etc.), and this behavior is not	
Interactions	Doesn't support child's efforts or doesn't assist child to engage in age-appropriate social interactions	a reasonable response to protect child from harm.	
Demonstrates an understanding of the child's special needs and follows through with treatment interventions	Inconsistently acknowledges or provides for child's special needs; inconsistently uses/follows treatment interventions	Refuses or is unable to acknowledge/provide for child's special needs	Child has exceptional needs which parents cannot/will not meet.

# 5. CPS History

Criteria: Family's previous involvement in the child protective services system and the implications this has for prognosis, strategies for engagement and treatment planning.

Low Risk	Moderate Risk	High Risk	Threats to Safety
No evidence of prior maltreatment of any child	Prior CPS referrals but case never opened because of insufficient risk or lack of substantiation finding or determination that child	Life-threatening injuries, blows to head or vital organs in previous maltreatment	
Isolated incident in previous case record of abuse or neglect and low	was unsafe.	Pattern of severe neglect or of failure to provide basic care.	
risk, no threats to safety.	Slight to moderate injury (e.g., bruises to buttocks) in previous maltreatment and low to moderate risk, no threats to safety.	Multiple prior substantiated referrals	
	Pattern of minor neglect and low to moderate risk, no threats to safety.	Single incident where safety concerns and/or high risk were documented	
Family initiated services or previous nvolvement with agency and recognized basic changes that were	Family reluctant to work with CPS or service providers	Family highly resistive to previous CPS involvement.	One or both parents have failed to benefit from previous professional help
needed.		Prior Termination of Parental Rights to a child	that was associated with safety concerns.
Family engaged in services and expressed benefit from intervention; CPS staff concurred	Engaged in previous CPS services but lacked investment in change.	Family had a negative experience with previous services (e.g. punitive, culturally inappropriate, disrespectful, etc.)	
Family continues to utilize strategies or skills gained through previous intervention	Family views previously-learned strategies or skills as beneficial, but has regressed in their implementation	Family rejects strategies or skills offered in previous CPS interventions	

### III. DOMAIN: PARENT/ADULT CAREGIVER INDIVIDUAL FUNCTIONING

### 1. Parent/Caregiver Acceptance of Responsibility to Protect

Criteria: The degree to which the parent/caregiver acknowledges maltreatment, risk and safety concerns, accepts responsibility and is willing to protect and desires to change behaviors that impact care and safety of the child(ren).

Functioning Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning		Threats to Safety
Acknowledges maltreatment and risk of harm and understands severity of situation	Acknowledges maltreatment under duress only; does not understand and/or disputes severity of situation  Minimizes presence of risk and threats to safety	Denies maltreatment; denies risk or safety concerns, creates implausible stories to explain injuries or illness	•	Both parents cannot/do not explain injuries and/or conditions
Demonstrates acceptance of his/her own responsibility for the maltreatment and/or responsibility to protect child	Accepts only partial responsibility for maltreatment or providing safety; minimizes impact on child and overestimates child's resilience	Projects blame unto others, denies need and responsibility to protect.	•	One or both parents lack knowledge, skill or motivation in parenting which affects the child's safety.
Expresses and demonstrates remorse for actions resulting in harm to the child.	Regrets incident/conditions somewhat, but does not demonstrate sufficient remorse or commitment to make necessary change.	Believes the maltreatment was appropriate parental intervention and believes the child deserved it.	•	One or both parents intend(ed) to hurt the child and do not show remorse.  Maltreating parent exhibits no remorse or guilt.
Understands what behaviors need to change to protect the child and is committed to making the changes.	Expresses concern but vacillates in motivation to protect; methods of protection are inadequate; has been ineffective in past attempts to prevent maltreatment.	Does not recognize need to protect child  Refuses or is unable to protect child  Leaves child with known maltreater or allows known maltreater to have access to the child	•	No adult in the home will perform parental duties and responsibilities

Is receptive to and participates actively in services, uses services to change behavior.	Participates in services but does not significantly change behavior;	Passively or actively undermines intervention  Is hostile to agency contact or involvement; p/c refuses to allow treatment/services for child; p/c refuses to participate in treatment/services; p/c is verbally abusive and/or threatening to service providers	One or both parents overtly reject intervention:
Family maintains safety plan	Family is inconsistent in the implementation of the safety plan.	Family rejects safety plan, refuses to implement needed safety services.	

2. Parent/Caregiver Conditions, Behaviors, Capacities and Life Skills That Impact Parenting and Safety of Child

Criteria: The degree to which the parent/caregiver manages own mental health and use of substances, regulates own behaviors and manages emotions that impact the care and safety of the child. The degree to which the parent/caregiver demonstrates basic life skills and manages the impact of disabilities that interfere with the provision of care and safety for the child.

Functioning Supports Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Has no mental health condition that interferes with parenting capacities.	Sporadic in using strategies and services that improve functioning/sporadic in managing	Unmanaged mental health condition results in severely inadequate care of child or places child in danger.	One or both parents cannot control behavior.
Has a mental health condition that can interfere with parenting capacities, but manages his/her condition to assure that the children receive adequate physical and emotional care.	mental health condition.  Mental health condition results in periodic inability to provide for child's basic needs and protect child.	Unmanaged mental health condition allows parent and/or child to be exploited, endangering the child's care and safety  Unmanaged mental health condition causes regular interruption of basic parenting.  Unmanaged mental health condition jeopardizes child's	No adult in the home will perform parental duties and responsibilities.
Has no past or present substance abuse issues that interfere with parenting capacities.	Parent's substance abuse results in periodic inability to provide for child's basic needs and protect child.	physical, cognitive, emotional and/or social development.  Parent is addicted or parent's uncontrolled abuse of substances results in severely inadequate care for the child or places child in danger.	One or both parents cannot control behavior.
Has a substance abuse problem but controls substance use to assure that the children receive adequate care	Is sporadic in using strategies and services and/or inconsistent in ability to control behavior.	Substance abuse causes regular interruption of basic parenting.  Substance abuse jeopardizes child's physical, cognitive, emotional and/or social development.	No adult in the home will perform parental duties and responsibilities
Manages anger effectively in non- aggressive ways.	Is inconsistent in ability or willingness to manage anger without aggression.	Is verbally and physically abusive to family members when angry.	One or both parents are violent.

Demonstrates empathy for others: considers and understands the feelings and needs of others, acts to help others meet needs, finds ways to meet own needs without jeopardizing the well-being of others; is sensitive to the needs of others  Sets aside or delays personal gratification in order to meet the child's needs.  Is not impulsive or controls impulses so that the needs of the children take priority.  Thinks before taking action. Takes deliberate, reasoned action.  Exercises mature judgment in matters related to the child's health, safety and welfare.	Is somewhat insensitive to others, sporadic in considering the needs of others, self-centered in some behaviors, but remorseful when behaviors hurt others.  Assures that child's basic needs are met but does not defer own needs to meet child's other needs.  Understands the importance of meeting the children's needs, but is inconsistent in ability to control impulses that jeopardize the care and safety of the children.  Inconsistent about thinking before acting in matters related to the child's health, safety and welfare; actions/decisions sometimes demonstrate immature or faulty judgment.	Lacks empathy: considers and meets own needs, resulting in harm to others; self-centered in all behaviors; does not regret harm caused to others  Dominates, controls and intimidates others in the family  Demonstrates pathological absence of conscience  Meets own needs before meeting the child's needs.  Does not control impulses that jeopardize child's care and safety (e.g., impulsive buying, gambling, sexual attraction to children, impulsively leaving the home)  Chronically acts without reflection or thought; chronically demonstrates poor judgment, immaturity.	<ul> <li>One or both parents intend(ed) to hurt child and do not show remorse.</li> <li>Maltreating parent exhibits no remorse or guilt.</li> <li>One or both parents lack knowledge, skill, motivation in parenting which affects child safety.</li> </ul>
Demonstrates a sufficient level of independence and self esteem, appropriate to culture, to handle the day-to-day requirements of life.  Demonstrates sufficient knowledge and skills to handle the day-to-day requirements of life (manage time and set priorities, manage household needs, manage finances, basic reading and writing skills, etc.); or uses supports effectively to compensate for limitations.	Is sporadic in ability to act independently; behaviors reflect a somewhat negative or ambivalent self-concept.  Limitations in knowledge and skills to handle day-to-day requirements of life influence parents' ability to consistently provide basic care to the child.	Is entirely dependent on others to take care of daily decisions and needs; believes self incompetent, incapable and unworthy.  Lacks basic knowledge and skills to handle day-to-day requirements of life, jeopardizing his or her ability to provide basic care to the child.	<ul> <li>One or both parents cannot control behavior.</li> <li>One or both parents lack knowledge, skill, motivation in parenting which affects child safety.</li> </ul>

Has no cognitive or physical health disability/impairment that interferes with parenting capacities

Has a cognitive/physical disability that can interfere with parenting capacities, but uses supports to compensate for disability/impairment and assure that the children receive adequate care.

Has disability/impairment that results in periodic inability to provide for child's basic needs and protect child.

Sporadic in using supports to assure that the children receive adequate

Has a disability/impairment which results in severely inadequate care for the child or places child in danger and has not accessed/accepted supports that compensate for disability or impairment

Disability/impairment allows parent and/or child to be exploited, endangering the child's care and safety.

Disability/impairment results in regular interruption of basic parenting

Disability/impairment jeopardizes child's physical, cognitive, emotional and/or social development.

 One or both parents lack skill, knowledge, motivation in parenting that affects child safety. 3. Parent/Caregiver Ability to Manage Stress, Solve Problems and Capacity to Establish and Sustain Interpersonal Relationships Criteria: The degree to which the parent/caregiver demonstrates coping skills and manages stress, solves problems effectively and develops and sustains adult relationships.

Functioning Supports Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Has dependable sources of support and direct assistance	Has limited contact with supportive persons, or contacts with others are superficial	Has no dependable source of support and help, or contacts are consistently conflictual or negative	
Is aware of and utilizes community resources	Has people to socialize with, but not one to go to for support and assistance  Makes limited use of community resources	Is physically isolated (e.g. no telephone, no transportation) from usual sources of support and assistance	
	Experiences frequent conflict with extended family or with other significant parties that interferes with usual parenting	Actively avoids involvement with others who could offer support	
Enjoys being with others and has the capacity to develop close friendships and trusting relationships.	Does not form close relationships but is able to develop and maintain casual/social relationships.	Is very distrustful or suspicious of others, seeks primarily to manipulate, use and control others or avoid others.	
Has effective strategies to cope with stressful situations and maintain adequate care of the	Is inconsistent in ability to manage life stressors, which occasionally interferes with the basic care of the children	Becomes aggressive and/or explosive when faced with problems or stress.	One or both parents are violent.
children.		Becomes emotionally immobilized when faced with problems or stress, results in chaos which significantly interferes with the care and safety of the children	<ul> <li>One or both parents cannot control behavior.</li> <li>No adult in the home</li> </ul>
		Is easily overwhelmed by routine matters.	will perform parental duties and responsibilities.

Accepts responsibility for his/her own behaviors and problems and demonstrates ability to solve and manage problems effectively.	Often blames others but acts in ways to solve and manage problems.  Takes responsibility for behaviors and problems but has difficulty solving and managing problems  Is sporadic in ability or motivation to solve problems.	Projects blame unto others (spouse, child, relatives, the system, etc.) for problems and does not take responsibility to change behaviors or manage/solve problems  Denies the existence of behaviors and problems that threaten the child's care and safety. and/or effects on the child	•	Child is seen by either parent as responsible for the parent(s)' problems.  Both parents cannot/do not explain injuries and/or conditions.
Seeks mutually satisfying resolutions to conflict	Seeks solutions that primarily benefit self.  Fails to use age/culturally appropriate means to solve conflicts.	Uses threats, verbal and physical intimidation and abuse to control others when conflict arises.  Parent's avoidance of conflict or indifference jeopardizes the child's care and safety.	•	One or both parents are violent.  One or both parents lack knowledge, skill or motivation in parenting which affects child safety.

### 4. Parent/Caregiver History of Maltreatment as Child

Criteria: Parent/Caregiver's history of childhood experiences, including attachment and bonding, care and protection received and trauma and the extent to which any effects of a negative child history impact current functioning.

Functioning Supports Safe and	Moderate Problems in	Significant Problems in Functioning	Threats to Safety
Stable Family	Functioning/Periods of Successful		·
	Functioning		
Childhood was free of maltreatment, violence, and trauma; basic needs were met; had nurturing adult in childhood; experienced minimal conflicts.	Had frequent disappointments in childhood; experienced inconsistent caregiving and nurturance and a moderate level of conflicts, and currently experiences some emotional or developmental problems or maladaptive behaviors that interfere with parenting.	Had significant negative experiences in childhood (maltreatment, domestic violence, severe conflicts, deprivation of basic needs or nurturance) and currently experiences emotional or developmental problems or maladaptive behaviors that jeopardize children.	Refer to criteria 1-3 in Adult Caregiver Functioning Domain and to Parenting Domain
Parent has addressed/overcome the impact of his/her negative history and is able to adequately fulfill parenting role.	Had significant negative experiences in childhood, but has addressed/overcome the impact enough to adequately perform parental responsibilities some of the time.		

### IV. DOMAIN: FAMILY FUNCTIONING

# 1. Family Relationships

Criteria: The degree to which family relationships are stable and mutually supportive and exhibit a sense of cohesion among members.

Functioning Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Family feels and expresses strong sense of family identity and cohesion. Members demonstrate long-standing, strong attachment to each other.	Family feels they belong together, but demonstrates some behaviors that negatively impact the family's sense of its identity, cohesion and loyalty.	Family does not verbalize or demonstrate interactions that support a sense of family identity, cohesion or loyalty to other family members.	
Parental/caregiver relationship (when applicable provides mutual support and is mutually satisfying.	Parental/caregiver relationship (when applicable) is not verbally or physically threatening, but provides little or no emotional support.  Frequent conflict in couple relationship.	Parental/caregiver relationship (when applicable) is verbally or physically threatening or abusive.	One or both parents are violent.
Household composition is stable over time.  Changes in household composition are managed by adults so that child well-being is not compromised.	Household composition is not consistently stable and changes jeopardize the child's sense of emotional security.	Household composition changes regularly and the changes jeopardize the adult's ability or motivation to protect the child.  There are no family boundaries; adults exercise no discrimination as to who comes into home temporarily or for extended lengths of time; dangerous persons/persons involved in dangerous criminal activities allowed in home.	<ul> <li>Living arrangements seriously endanger the physical health of the child.</li> <li>One or both parents lack knowledge, skill motivation in parenting that affects child safety.</li> </ul>
Family works together and pursues healthy (or non-harmful) recreational activities together.	The parents do not make any effort or attempt to spend time with their child(ren)	Family members distance themselves from each other and operate within their own sphere.	

# 2. Family Management and Organization

Criteria: The degree to which the family manages household functions and financial resources and demonstrates effective coping and problem-solving skills.

Functioning Supports a Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Roles are performed in an effective and developmentally or age-appropriate manner ensuring that the family needs	Family members are not consistent in performing roles, impacting the care and safety of the children.	Roles are not performed in an effective and developmentally or age-appropriate manner resulting in failure to meet family needs.	One or both parents lack knowledge, skill, motivation in parenting that affects child safety.
are met.  Generational boundaries are	Parent/caregiver not consistent in maintaining generational boundaries in areas related to the child's health, safety and welfare.	Family roles are reversed; individual and family needs are not met.	
clear and maintained.		Generational boundaries are not maintained. Parent/caregiver views child as a partner and behaves toward child as a partner/spouse.	No adult in the home will perform parental duties
		There is a significant imbalance in power and responsibilities between adults that jeopardizes either parent's ability to care for and protect the children.	and responsibilities.
Household management efforts and family rules result in a level of calm, order, and routine that supports provision for the child's health, safety and welfare.	Household management is characterized by a lack of order and routine and family rules are unclear or cannot be depended on, jeopardizing the child's sense of security/safety.	Household management responsibilities are not carried out, no family rules, resulting in a <i>chronically</i> chaotic home environment that fails to protect family members.	Living arrangements seriously endanger the physical health of the child.
Income is adequate and is used to meet the family's basic needs.	Income is irregular, family has difficulty paying bills to meet basic needs.	The family is constantly in crisis because of insufficient funds.	Family does not have resources to meet basic needs.
Debts are at a manageable level - family is able to pay against them.		Family has sufficient income but does not provide for basic needs; money often spent on gambling, drugs, and/or impulsive buying.	One or both parents cannot control behavior.
шеш.		Family lacks sufficient income to provide for the basic needs of housing, food, and medical care.	

Family roles can flexibly adjust their roles constructively in response to crisis, changes in family developmental stage or other changes	Family members are willing but lack ability to adjust roles in response to crises/changing needs.  Family members sometimes adjust roles, placing more responsibility on a child than the child is developmentally able to handle.	Family roles are rigid, creating barriers to family's ability to meet needs.  Adults abdicate responsibility for roles or functions assigned to them in family.		
Family members routinely communicate needs effectively and constructively	Family communication is sporadic, unproductive or frustrating in areas related to the child's health, safety and welfare.  Under stress, family members often use verbally and emotionally abusive communication methods.	Communication is routinely used to intimidate, control, disempower and hurt other family members.  Family members are generally unable to communicate, resulting in needs not being met.	•	One or both parents are violent.
Family constructively talks and works together to solve problems.	Family members recognize problems but have no methods/practices for solving problems and managing stress.  Family can effectively manage everyday situations but abandons problem-solving strategies in times of stress.	Family consistently denies presence of problems or the need to address problems.  Family is easily overwhelmed by everyday situations and unable to solve even minor problems.	•	No adult in the home will perform parental duties and responsibilities.
Family members routinely assist each other	Family members are sporadic in their willingness or ability to assist each other.	Family is not a source of support or assistance for its members. Each member is on his/her own	•	One or both parents lack knowledge, skill, motivation in parenting that affects child safety

# 3. Family Supports

Criteria: The degree to which family support systems encourage safe and stable family functioning and assist in meeting family needs and providing for the children's health, safety and welfare.

Functioning Supports Safe and Stable Family	Moderate Problems in Functioning/Periods of Successful Functioning	Significant Problems in Functioning	Threats to Safety
Extended family, friends and/or other informal resources are supportive and dependably provide appropriate help to the family when needed.  The family seeks out and allows, extended family, friends and other informal resources to help them. These supports/influences are positive.	Family has some supports but uses them sporadically.  Access to supports/resources is limited.  Available supports/resources provide some support but are not a good match for the family's needs.  Family has no informal supports or is unwilling or unable to use informal supports, but is willing to use formal resources.  Family supports are available but cannot be relied upon in time of need.	Family refuses to use any resources outside of the nuclear family.  Friends, community, extended family contacts reinforce negative behaviors  Family has no support network, or informal resources are available, but the family is unable or unwilling to access them.	
Family is integrated into the community: has an established pattern of open communication and involvement with a wide network, which supports family's ability to provide for the child's health, safety and welfare.	Family members have limited contacts outside of the home, or contacts are superficial.	Family is extremely isolated, socially and/or physically and family members, by choice, have minimal contact with others outside of the home.  Family has a transient lifestyle and is not connected to any community.  Family is strongly connected to a group that avoids contact with people outside of that group and/or actively resists any intervention by government or other authorities and this jeopardizes the child's health, safety and welfare.	<ul> <li>There is some indication parents will flee.</li> <li>One or both parents overtly reject intervention.</li> </ul>

### V. DOMAIN: ENVIRONMENTAL FACTORS

# 1. Safe Neighborhood Environment

Criteria: The degree to which the neighborhood is safe and non-threatening for family members.

Neighborhood Environment Supports a Safe and Stable Family	Significant Problems in Neighborhood Environment	Threats to Safety
Children can participate in outdoor activities without fear of harm.	Children are not safe playing outdoors or walking to school or bus.	Living arrangements seriously endanger the physical health of the child.
Neighborhood community watch is in effect, or neighbors know one another and have regular open communication.	Neighbors are unwilling to be involved to protect others in the community or to support/assist this family.	
There are no environmental hazards, or barriers exist (fences, etc.) to keep children safe from existing hazards.	Children have access to environmental hazards, e.g. waterways; open well/mines; busy streets/highways unrestrained, dangerous animals; machinery; chemicals, etc.	
No signs of drug or gang activity or violent criminal activity in the environment.	High crime rate/area demonstrated by active and violent gang activity, frequent destruction of property, drive by shootings, drug activity, violence against people and property.	
Environment provides safe, potable water.	Presence of chemical contamination or other toxicity in environment.	

# 2. Community Resources

Criteria: The degree to which the community has formal and informal resources to meet the family's needs.

Community Resources Support Safe and Stable Family	Significant Problems in Community Resources	Threats to Safety
Schools, child care, neighborhood organizations, clubs, religious/spiritual organizations, recreational opportunities and professional agencies that are culturally relevant are available and accessible in the community.	The community lacks schools, child care, neighborhood organizations, clubs, religious/spiritual organizations, and professional agencies.	NONE
The community has reliable and easily accessible public transportation, or family does not need to rely on public transportation.	The community lacks reliable and accessible public transportation systems, and the family is often reliant on public transportation.	
Emergency services are available and reliable and respond in a timely manner.	Law enforcement, medical or fire department services are unable or unwilling to respond in a timely manner in emergencies.	
The community has adequate employment opportunities to support meeting the family's basic needs or the family is able to access such resources elsewhere.	The community lacks adequate employment opportunities to meet the family's basic needs.	
The community has adequate education and training resources to improve the family's opportunities to meet their needs or the family is able to access such resources elsewhere.	The community lacks education and training resources that improve the family's opportunities to meet current and future needs.	